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U.S. DEPARTMENT OF COMMERCE
PATENT AND TRADEMARK OFFICE

**REQUEST FOR CONTINUED EXAMINATION (RCE)
TRANSMITTAL FORM (37 C.F.R. § 1.114)**

DOCKET NO. 14325/15 (formerly 10191/2479B)	APPLICATION SERIAL NO. 10/705,523	EXAMINER D. LAM	ART UNIT 2617
FILING DATE November 10, 2003		CONFIRMATION NO. 4852	
Applicant(s): Martin HANS et al. I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail.			
Address to: Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450		in an envelope addressed to: Mail Stop RCE Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on Date: 12/23/2008 Signature: [Signature]	
This is a Request for Continued Examination under 37 C.F.R. § 1.114 (RCE) of pending application Serial No. 10/705,523, filed on November 10, 2003, entitled METHOD OF ASSIGNING TRANSMISSION CHANNELS IN A TELECOMMUNICATIONS NETWORK AND USER STATION .			
The following constitute the submission <u>required</u> by 37 C.F.R. § 1.114(a) and is attached: <input checked="" type="checkbox"/> Please enter the accompanying RCE-Amendment After a Final Office Action (further responsive to the Final Office Action mailed on May 2, 2008, and in lieu of an Appeal Brief due December 29, 2008). <input type="checkbox"/> Information Disclosure Statement and Form PTO-1449 <input type="checkbox"/> Drawing Changes <input type="checkbox"/> Other Submission: _____			

1. The filing fee for this RCE and the required amendment/submission is calculated below. The fee below is calculated based on the status of the claims after the entry of the attached amendment/submission. The fee for any new additional claims is included with this RCE, the fee for previously entered additional claims having already been paid.

	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT NUMBER EXTRA*	RATE (\$) PER CLAIM	FEE (\$)
BASIC FEE						810.00
TOTAL CLAIMS	7	-	20	0	52.00	0.00
INDEPENDENT CLAIMS	1	-	3	0	220.00	0.00
MULTIPLE DEPENDENT CLAIM					390.00	
12/30/2008 HVDUNG1 00000042 110600 10705523				*Number extra must be zero or larger	TOTAL	810.00
01 FC:1801	810.00 DA					
	If Applicant is a small entity under 37 C.F.R. §§ 1.9 and 1.27, then divide total fee by 2, and enter amount here.					SMALL ENTITY TOTAL

2. Please charge the required RCE and submission filing fee of **\$810.00** to the **deposit account of Kenyon & Kenyon LLP, Deposit Account No. 11-0600**.
3. The Commissioner is hereby authorized to charge payment of the fees, including any additional and/or extension fees required, associated with this communication or arising during the pendency of this application, or to credit any overpayment, to the deposit account of Kenyon & Kenyon LLP, deposit account number **11-0600**.
4. Two duplicate copies of this transmittal form are enclosed.

Respectfully submitted,

Dated: 12/23/2015


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